

At **Ferris State University** Big Rapids, MI

Take Charge of Your Journey! **SAVE THE DATES!**



2014 Michigan Teen Conference • Wed-Thurs • June 18-19

This special conference is for youth ages 14-21 preparing to exit foster care, their caregivers and the professionals who work with them.

Wednesday-Thursday **June 18-19, 2014** at
Ferris State University in Big Rapids, MI

**Promote this event with foster youth and
be pro-active: secure funding now!**

Funding sources: YIT • MYOI • Private fund raising
Use registration form to calculate cost for your funding request.

ONLINE REGISTRATION
COMING SOON TO www.michfed.org



Find the conference
on Facebook!

<https://www.facebook.com/MichiganTeenConference>

Also find conference details at
www.michfed.org

EARLY CONFERENCE SPONSORS INCLUDE:

Fostering Success Michigan
Lutheran Social Services of Michigan
Michigan Department of Human Services—Youth In Transition
Michigan Federation for Children & Families

Use Sponsor Form provided to add your name to this list!

Take Charge of Your Journey!

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COMING SOON TO www.michfed.org

Do you know a youth in **Foster Care or Independent Living** who needs to learn about money management, employment, educational opportunities, healthy relationships, or housing? If you do, then help them pre-register for the **2014 Michigan Teen Conference**.

Youth must be ages 14 to 21 and in Foster Care or Independent Living. If attendees are under the age of 18, a chaperone **MUST** attend the conference with them and accompany them at all times. Caretakers of the youth and professionals who work with teens are also invited. Attendees will sharpen their understanding of what is available and required for foster youth to make the challenging transition to adult life.

What attendees have said about the Teen Conference:

"The keynote speaker was inspirational ...amazing...very spiritual."

What I liked best about the Teen Conference:

- Talking to people who want to help us
- Meeting other kids
- Variety of speakers
- Useful information
- Everything
- Activities

See Frequently Asked Questions in this brochure!



Preliminary Schedule (subject to updates)

| | | |
|----------------------------|--|---|
| Tues., June 17 | 5:00 – 6:30 PM 6:00 – 8:00 PM 6:00 – 10:00 PM | Dinner available Early check-in Recreation/entertainment options |
| Wed., June 18 | 7:00 – 8:30 AM 9:00 – 10:30 AM 10:30 AM – 12:00 PM 12:00 – 1:00 PM 1:00 – 2:00 PM 2:00 – 2:15 PM 2:15 – 3:15 PM 3:45 – 4:45 PM 5:00 – 6:30 PM 6:00 – 10:00 PM | Breakfast Registration Opening remarks & keynote Lunch Workshop A Break Workshop B Ferris State U. campus tour Dinner Recreation/entertainment options |
| Thurs., June 19 | 7:30 – 9:00 AM 9:15 – 10:30 AM 10:30 – 10:45 AM 10:45 – 11:45 AM 12:00 – 1:00 PM 1:00 – 3:00 PM 3:00 – 4:00 PM | Breakfast General session Break Workshop C Lunch Walk through Life Closing & gift giveaway |

Workshops will feature topics such as:

- Budgeting/money management (beginner & advanced)
- College supportive programs (youth panel)
- Funding resources (ETV, YIT)
- Housing
- Job search/employment
- Legal rights of youth in care and as adults
- Michigan Youth Opportunities Initiatives
- Social media
- Young Adult Voluntary Foster Care

In addition, a special **Walk through Life** will feature numerous life stations to visit and resources to grab at this fun, interactive two-hour session. It is a chance for youth to put into practice many of the life skills they acquired during the conference. Stations will include:

- Education
- Employment
- Finances
- Housing
- Identification
- Transportation



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Frequently asked questions

Do I need a chaperone? *All youth under the age of 18 must have a chaperone at all times, including overnight. A minimum of one adult chaperone to three youth is required throughout the conference.* Dorm rooms sleep up to four individuals; therefore, same-sex chaperones will be needed. Chaperones must be identified on the registration form.

Young people in IL or YAVFC programs who are 18 years or older do not require a chaperone, but one is strongly encouraged.

What is a chaperone responsible for? One chaperone is required for up to three youth under age 18 attending the conference, and *a signed agreement for each chaperone attending must be submitted with the registration.* The agreement form is provided with this brochure and explains the chaperone's responsibilities throughout the conference. One chaperone per form; copy as needed.

Do I need to sign a consent form? *Yes, a signed consent form for each youth attending must be submitted with the registration.* The consent form is provided with this brochure; one youth per form; copy as needed.

How much does it cost to register? The registration fee is \$110 for each registrant and includes: all workshop materials; dinner and evening activities on Tuesday; lunch, dinner and evening activities on Wednesday; and breakfast and lunch on Thursday. Fees must be paid prior to attending the conference. Overnight room charges are in addition to the registration fee (see separate question). Registrations submitted after May 30, 2014, require an additional \$25 per person.

Are there funding sources that can help pay for my registration? Very likely! Here are some options that your worker may be able to access:

- ▶ County **Youth In Transition (YIT)** funds CAN be used to pay for youth to attend the conference. Additionally, YIT funds can be used for *chaperones' travel costs only—mileage, meals (\$65 of the \$110 fee is for meals) and overnight room.* YIT funds CANNOT be used for chaperones' cost of registration for the conference (\$45 of the \$110 fee). YIT funds can be accessed through the local DHS foster care worker.
- ▶ This conference is an **Approved Asset Training, thus, county Michigan Youth Opportunities Initiative (MYOI)** funding CAN be used to pay for youth to attend the conference. If your county has MYOI, consult your MYOI Coordinator for funds.
- ▶ If youth are not eligible for YIT or MYOI funding, workers are encouraged to assist youth in raising funds to cover their cost of attending.



If you have trouble locating funding for your youth to attend, please contact Laura Mitchell at LSSM:
lmitc@LSSM.org
(800) 886-5776



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Where do I sleep? Overnight accommodations will be available in on-campus dorm rooms for youth and their chaperones. Bring an alarm clock, fan (no air conditioning!), and toiletries. Linens and towels are provided. Alternatively, off-site hotel locations are available nearby at participants' own expense (see inset for suggestions). See Registration Form for dorm room costs.

What if I have to cancel my registration? All cancellations must be submitted in writing. Written cancellations received and verified on or before June 1, 2014, will be refunded, less a \$25 fee. No refunds will be issued after June 1, 2014. If you are unable to attend, please notify LSSM in Grand Rapids—(616) 356-1934 or (800) 886-5776—that you will send someone in your place.

Am I liable for any damages I may cause? By registering to attend the conference, you are agreeing to be financially responsible for any damages incurred by yourself to any portion of the facilities in use by the conference. You are also agreeing to be responsible for abiding by FSU campus rules and local laws for the duration of the conference.

Area hotels

If you prefer overnight accommodations in a nearby hotel, below are two options with special room rates. Reservations and payment must be made directly with the hotel; tell them you are with the 2014 Michigan Teen Conference. Reserve your room early to assure space is available (tax is additional).

Quality Inn, 1705 S. State Street, Big Rapids, MI
(231) 592-5150
\$60 per night (two beds). RATE TO BE CONFIRMED
A block of rooms will be held until May 31.

Holiday Inn, 1005 Perry Street, Big Rapids, MI
(231) 796-4400
\$89 per night (two beds). RATE TO BE CONFIRMED
A block of rooms will be held until May 31.

IMPORTANT: Youth and chaperones are expected to stay together in the same overnight room.

Sponsor Form



2014 Michigan Teen Conference

Take Charge of Your Journey!

**ONLINE
REGISTRATION
COMING SOON TO**

www.michfed.org

The **2014 Michigan Teen Conference** is offering the opportunity for businesses, individuals and programs to support teens as they prepare to exit foster care and become successful adults! As a sponsor, you will have the opportunity to promote your business and let your community know how **youth-friendly** your services are.

Please consider which sponsor option below would best suit your idea of promotional interests through this gesture of support. If you have questions or another idea for sponsorship, please contact Laura Mitchell, chair of the Conference Planning Committee. She can be reached at Imitc@LSSM.org; (616) 356-1934.

Sponsor selection (check all that apply):

| | | |
|--|--|---|
| <input type="checkbox"/> Keynote – \$1,500 The KEYNOTE SPONSOR will receive: <ul style="list-style-type: none"> Recognition in event printed materials and signage. Opportunity to provide sponsor's pre-printed material (brochures, coupons, etc.) for conference bags. | <input type="checkbox"/> How many: <input type="text"/> | Prize – \$150 or item =/+ value Each PRIZE SPONSOR will receive: <ul style="list-style-type: none"> Recognition in event printed materials and signage. |
| <input type="checkbox"/> Flash Drive – \$1,000 Each FLASH DRIVE SPONSOR will receive: <ul style="list-style-type: none"> Recognition in event printed materials and signage. | <input type="checkbox"/> How many: <input type="text"/> | Youth – \$150 Each YOUTH SPONSOR will receive: <ul style="list-style-type: none"> Recognition in event printed materials and signage. The reward of knowing a youth attended the conference who otherwise could not have afforded to register. |
| <input type="checkbox"/> Pad Folio – \$850 The PAD FOLIO SPONSOR will receive: <ul style="list-style-type: none"> Recognition in event printed materials and signage. | <input type="checkbox"/> How many: <input type="text"/> | Activity – \$50 Each ACTIVITY SPONSOR will receive: <ul style="list-style-type: none"> Recognition in event printed materials and signage. |
| <input type="checkbox"/> Conference Bag – \$750 The CONFERENCE BAG SPONSOR will receive: <ul style="list-style-type: none"> Recognition in event printed materials and signage. | <input type="checkbox"/> Other donation – Describe: <input type="text"/> | |
| <input type="checkbox"/> Conference T-Shirt – \$750 Each CONFERENCE T-SHIRT SPONSOR will receive: <ul style="list-style-type: none"> Recognition in event printed materials and signage. | Total amount due: \$ <input type="text"/> | |

Organization/company name: _____

Contact person: _____ Title: _____

Mailing address: _____

Phone: _____ Fax: _____

E-Mail: _____

Web site: _____

All sponsors must provide camera-ready artwork (logo) in hi-resolution digital format (jpg, pdf, eps, gif or tiff) no later than April 30, 2014. E-mail the file to Laura Mitchell, Imitc@LSSM.org.

Send check with form to conference fiduciary:
Lutheran Social Services of Michigan
 207 E. Fulton, 4th Floor
 Grand Rapids MI 49503

or fax the completed form to (616) 356-5779.

PAYMENT FOR SPONSORSHIP is due by April 30, 2014.

- ☐ Check enclosed for total amount due.
- ☐ Check will be mailed for total amount due.

Registration Form

TO REGISTER, mail completed form to LSSM, 207 E. Fulton, 4th Floor, Grand Rapids MI 49503 or fax the completed form to fax (616) 356-5779.

Registrations and full payment must be received by LSSM by May 30, 2014.

If you have questions, contact Laura Mitchell at LSSM lmitch@LSSM.org or **(800) 886-5776**.

**Registration should be completed by the Private Agency or DHS Staff or Caregiver.
Please type or print clearly.**

| Contact person | | | |
|---|-----------------------------|---------------|---|
| Name: | | | |
| DHS office or private agency: | | | |
| Agency address: | | | |
| City/state/zip code: | | | |
| Telephone: | | Fax number: | |
| E-mail address for contact person: | | | |
| One chaperone is required for every three youth. | | | |
| Chaperone A signed Chaperone Agreement is required; see separate form. | | | |
| Name: | | | Fee |
| Role/title: | | | \$110 |
| Cell phone #: | Email: | | |
| Youth attending A signed Consent form is required for each youth; see separate form. | | | |
| Youth's name | Age (at time of conference) | Circle gender | Circle fee |
| | | M F | \$110 |
| | | M F | \$110 |
| | | M F | \$110 |
| Other adults/staff attending | | | |
| Name | Role/title | | Circle fee |
| | | | \$110 |
| | | | \$110 |
| | | | \$110 |
| | | | \$110 |
| On-campus dorm rooms • First come, first serve* | | | |
| Length of stay | Rate per person | # of people | Amount |
| Two nights (Tues. and Wed., June 17 & 18) | \$45 | | \$ |
| One night (Wed., June 18) | \$25 | | \$ |
| Total amount payable to "Lutheran Social Services of Michigan" by May 30, 2014: \$ | | | |
| LSSM Federal ID#: 38-1360553 | | | |
| <input type="checkbox"/> Check enclosed for total amount due. | | | After May 30, ADD \$25 to each \$110 registration; # registrants _____ x \$25 = \$ |
| <input type="checkbox"/> Check will be mailed for total amount due. | | | After May 30, NEW TOTAL DUE = \$ |

A signed Consent for each youth attending and a signed Chaperone Agreement must be submitted with registration. The forms are provided with this brochure; one person per form; copy as needed.

Registration fee includes all workshop materials; dinner and evening activities on Tuesday; lunch, dinner and evening activities on Wednesday; and breakfast and lunch on Thursday. Fees must be paid prior to attending the conference.

County Youth In Transition funds CAN be used to pay for the youth to attend the conference. Additionally, YIT funds can be used for chaperones' travel costs only—mileage, meals (\$65 of the \$110 fee is for meals) and overnight room. YIT funds CANNOT be used for chaperones' cost of registration for the conference (\$45 of the \$110 fee). YIT funds can be accessed through the local DHS foster care worker. If your county has MYOI, consult your MYOI Coordinator for funds.

Cancellation policy: All cancellations must be submitted in writing. Written cancellations received and verified on or before June 1, 2014, will be refunded, less a \$25 fee. No refunds will be issued after June 1, 2014. If you are unable to attend, please notify LSSM in Grand Rapids—(616) 356-1934 or (800) 886-5776—that you will send someone in your place.

Liability policy: By registering to attend the conference, you are agreeing to be financially responsible for any damages incurred by yourself to any portion of the facilities in use by the conference. You are also agreeing to be responsible for abiding by FSU campus rules and local laws for the duration of the conference.

*Alternatively, overnight accommodations can be made at a nearby hotel (see page 6 of Teen Conference brochure).



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Conference dates: **Wednesday-Thursday, June 18-19, 2014**

Location: **Ferris State University, Big Rapids, MI**

Chaperone Agreement

As a volunteer chaperone, accompanying as many as three youth to and throughout this conference, I attest to the fact that I have read, understand, and agree to abide by all of the following procedures and protocols:

- ▶ I understand that this signed agreement must accompany the registration form.
- ▶ I will officially "check in" at the Chaperone Station upon arrival at the Registration area of the conference.
- ▶ As a chaperone, my primary role is to provide supervision of my assigned youth and to help these youth learn and enjoy themselves at the conference. This is a new experience for many of the teens, and I understand that I am their key resource and leader.
- ▶ As a role model for the youth, my positive attitude and enthusiasm will greatly enhance the youths' experiences at the conference. I will encourage the youth to listen to instruction, try new things and be open to new experiences.
- ▶ **I will provide supervision for my assigned youth AT ALL TIMES, including:**
 - **during general and workshop sessions;**
 - **during meals and break times;**
 - **during recreational activities (offered both Tuesday and Wednesday evenings); and**
 - **in dormitory rooms.**
- ▶ I understand that cell phones should be turned off or placed on vibrate during all conference sessions.
- ▶ I understand that overnight accommodations for youth and chaperones will consist of an on-campus dorm room and that we will need to bring an alarm clock, fan, pillows and toiletries; linens and towels are provided.
- ▶ I understand that smoking is not allowed indoors or in front of students. Smoking can occur in designated areas only.
- ▶ I understand that I must secure all oral medicines, prescription and non-prescription medicines, in their original containers, or keep them on my person at all times. (Please do not leave unsecured medicines in the dormitory.)
- ▶ I understand that directions to conference location and parking information will be emailed to me at the email address provided on the registration form.

Chaperone's
printed name: _____

Agency name: _____

Chaperone's signature: _____

Date signed: ____/____/____

Agency's supervisor or director's signature: _____

Date signed: ____/____/____

Please keep one copy of this signed Agreement for your organization's records and attach one to the Michigan Teen Conference Registration Form.

Michigan Teen Conference

Consent to Use of Name or Photo or Interview

One youth per form;
copy as needed.

Intended use _____ Michigan Teen Conference _____ Date: June 18 & 19, 2014

- ☒ **REGISTRATION:** I give my permission to the Michigan Teen Conference and its Planning Committee to use my name and information about myself and the circumstances of my relationship with the Michigan Teen Conference for registration tracking prior to and during the conference, and accounts receivable billing after the conference, as deemed appropriate by the Conference Planning Committee.
- ☒ **OVERNIGHT ACCOMMODATIONS:** I give my permission to the Michigan Teen Conference and its Planning Committee to use my name and information about myself and the circumstances of my relationship with Michigan Teen Conference for room assignment and monitoring at the designated residence hall at Ferris State University.

I understand that I will not be paid for the use of my name, and that I do not have the right to inspect or further approve the use to which my name, likeness, words and/or voice may be applied. I release the Michigan Teen Conference and its Planning Committee and all persons operating under its authority from any liability relating to the use of my name, likeness, words and/or voice or information about the circumstances of my relationship to the conference.

I consent to use of:

- Any and all of the following, or**
- ☒ My name (required)
- ☐ My portrait, picture, video image, photograph or any reproduction or likeness of me
- ☐ Quotation of my remarks
- ☐ Audio recording of my voice
- ☐ Information about myself, my family and the circumstances of our relationship with the Michigan Teen Conference and its 2014 Planning Committee.

| | |
|--|--------------------|
| Youth's Name (please type or print legibly): | Youth's Signature: |
| Youth's Address: | Daytime Phone: |
| Agency Name or DHS County Office: | |
| Personal Representative for Minor Child: | |
| Name of Personal Representative (please type or print legibly) | |
| Signature of Personal Representative: | Date: |

For recipients of Department of Human Service funded services, this permission expires on **12/31/14**.

This consent form is required for all youth who attend the Michigan Teen Conference for items that are identified above with a check mark.

Other items of consent are at the sole discretion of the person legally responsible for the youth. Please see box at the right for list of persons responsible to sign this consent.

Please keep one copy of this signed Agreement in the youth's file and attach one to the Michigan Teen Conference Registration Form.

Children's Services Manual FOSTER CARE – RELEASE OF INFORMATION

Consent for Release of Information to Others
FOM 722-4 (page 2 of 4) • CFB 2008-009 • 10-1-08

| Type of Care/Legal Status | Authorizing Party |
|---------------------------|--------------------------------------|
| Temporary court ward | Court/judge & parent/legal guardian |
| Permanent court ward | Court/judge |
| State ward (Act 220) | DHS monitor* |
| State ward (Act 296) | DHS monitor* |
| Voluntary foster care | Parent/legal guardian |
| MCI-O | DHS monitor* |
| OTI foster care | Sending state authority/court |
| Child placed out of state | Michigan authority supervising child |
| *For this conference only | |